

Policy Development Policy and Procedure

Approving body	Governing Board (GB)
Date approved	27 Feb 2025
Date of effect	Commencement of Operation
Next scheduled review	Two years from policy commencement
Policy owner	Chief Executive Officer (CEO)
Policy contact	Chief Executive Officer (CEO)
Related Documents	Delegations Policy and Schedule Zenith Governance Framework Compliance Management Framework Quality Assurance Framework Risk Management Framework
Higher Education Standards Framework (HESF) 2021 (Cth)	Standard 6.2.1 Standard 6.3.1-2

Purpose

1. Zenith Innovation Institute (**Zenith / ZII / the Institute**) is committed to attending to governance functions and processes diligently and effectively, including by defining roles and delegating authority as is necessary for effective policy development and management, and monitoring the implementation of those delegations.
2. This Policy outlines the authority, responsibilities, and processes for the development, implementation, review, and improvement of the Institute's policies and supporting documentation.

Scope

3. This Policy applies to:
 - (a) all staff with responsibilities under this Policy;
 - (b) members of governing bodies; and
 - (c) all policy, procedures, forms, registers and framework documents.

Policy

Principles

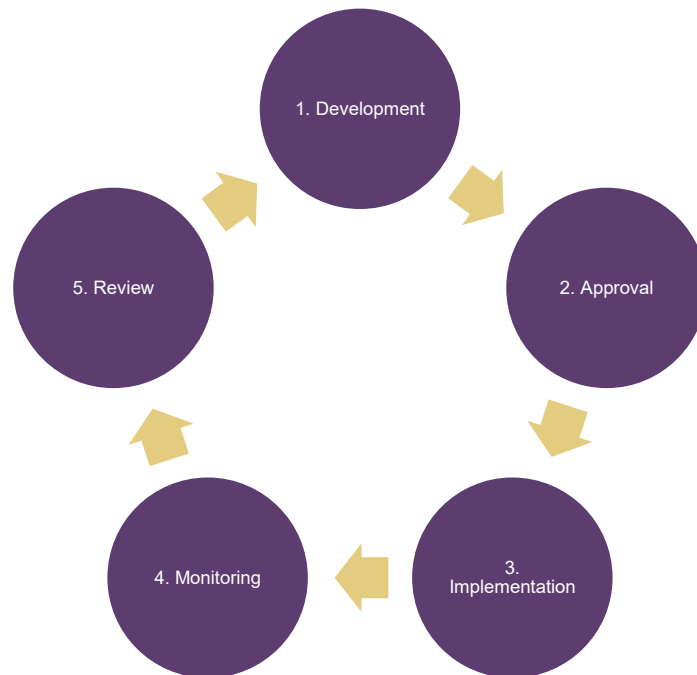
4. *Policy design:*
 - (a) is current and relevant to the operations of the Institute;
 - (b) promotes and protect the best interests of students and staff; and
 - (c) reflects the Institute's strategic goals and values, relevant regulatory requirements, sector best practice, and community expectations.
5. *Policy development, implementation and management:*
 - (a) accountabilities and responsibilities for the management of policies are clearly defined;
 - (b) policies are communicated, understood, and applied within the Institute and where needed, institute staff members are trained to implement policies;
 - (c) compliance with policies is monitored and corrective action is taken as required;
 - (d) policies are regularly reviewed for effectiveness and improved based on relevant evidence, changes in regulatory or legislative requirements, and stakeholder feedback; and
 - (e) policies are readily and easily accessible to stakeholders and are maintained on the Institute's website and made public unless the policy is for a restricted purpose or audience.

Roles

6. The key roles for the governance of the Institute's policies are:
 - (a) **Approving body:** the body accountable for the outcomes of the policy and which authorises the policy taking effect, including the Governing Board (GB) or the Academic Board (AB) (where the GB has delegated authority on academic matters to the AB);
 - (b) **Delegate:** the responsible body or officer for minor consequential amendments to approved policies or procedures that do not represent a material impact to the Institute's compliance or practices as approved by the approving body;
 - (c) **Policy owner:** the officer responsible for the development, implementation, and review of the policy – the policy owner must be a member of the Executive Management Team;
 - (d) **Policy contact:** the officer responsible for answering questions on the policy – the policy contact may be different from the policy owner (as nominated by the policy owner) and must be an individual;
 - (e) **Policy developer:** the person(s) responsible for researching, drafting, and consultation on a new policy – the policy developer may be an individual or group; and
 - (f) **Policy reviewer:** the person(s) responsible for researching, drafting, and consultation on a policy to be reviewed – the policy reviewer may be an individual or group.

Procedure

Policy cycle



Step 1 | Development

7. The following conditions may require a new policy or policy amendments:
 - (a) changes to higher education regulatory requirements;
 - (b) changes to other regulatory requirements or legislation;
 - (c) changes to the external operating environment;
 - (d) changes to internal operating procedures including new course development;
 - (e) a change of policy instigated by the Institute;
 - (f) recommendations or feedback from stakeholders, such as staff, students or alumni;
 - (g) review and compliance exercises identifying areas for improvement; and
 - (h) a combination of the above.
8. Formal development of a policy must be approved by a member of the Executive Management Team (usually, the expected policy owner).
9. During the policy development process, the policy developer will consider:
 - (a) relevant government policy, legislation, and regulation;
 - (b) existing policies of the Institute to ensure that there is no policy overlap or inconsistency;
 - (c) relevant public documents and policies from external organisations as part of benchmarking;
 - (d) the application of the policy in practice in the context of other policies and processes;
 - (e) the applicability of the policy to differing circumstances;

- (f) student or staff feedback; and
 - (g) any other relevant data.
10. Consultation will occur with relevant stakeholders during the development process.
 11. Draft policy documents and templates and forms will be presented to the policy owner for consideration. The policy owner may:
 - (a) recommend the policy for approval by the relevant approving body without amendment;
 - (b) recommend the policy for approval by the relevant approving body with specific amendments;
 - (c) refer the policy back to the developers for further work specifying the areas in which the policy requires refinement; or
 - (d) reject the policy.

Step 2 | Approval

12. Depending on the subject matter of the policy, the policy will be submitted for approval by the policy owner to the GB or AB, respectively.
13. All policies must be approved by the GB or the AB.
14. Approval of a policy must be formally recorded in the minutes of the relevant meeting of the approving body. Once the policy is approved, it will be entered into the *Policy Register* and referred to the policy owner for implementation.
15. Policies remain effective until formally rescinded.

Step 3 | Implementation

16. Depending on the scope and other requirements of the policy, the policy owner may need to develop and submit appropriate communication and implementation plans to the GB, AB and/or the Executive Management Team.
17. The Executive Management Team assists policy owners with implementation and dissemination. The policy owner will ensure that all new or reviewed policies are published on the Zenith website as soon as practicable and that all relevant stakeholders are advised by email of the new/revised document.

Step 4 | Monitoring

18. The policy owner is responsible for monitoring compliance with the policy and for embedding reporting mechanisms in the Institute's processes.
19. Monitoring of compliance, including breach handling, must be conducted in accordance with the Institute's *Compliance Management Framework* and *Risk Management Framework*.
20. The policy contact officer is responsible for providing support and advice on the implementation of the policy and its applicability. Student Services are responsible for providing advocacy services to students relating to matters covered in Institute policies.

Step 5 | Policy review

21. Zenith's policies will be reviewed on a regular basis in accordance with the policy document's next scheduled review which is also included in the *Policy Register*. The review cycle depends on the nature of the policy and its scope. A regular review every two (2) years is standard, but all policies must be reviewed within three (3) years of policy development or a prior policy review.

22. A review date will be set for each policy, allowing adequate time for the revision and approval process. All related procedural documents and forms will be reviewed concurrently with the policy and updated to reflect any policy changes.
23. The policy review process will include the following considerations:
 - (a) consistency with best practice including risk mitigation and continuous improvement at Zenith;
 - (b) changes in government policy, legislation, or regulation;
 - (c) stakeholders' needs and feedback;
 - (d) practicality;
 - (e) current organisational roles and positions including delegations; and
 - (f) relationship with other policies.
24. Following the policy review, a draft revised policy and related procedures and forms will be developed for consideration. This may take several iterations.
25. Once a revised policy is approved, the *Policy Register* is updated, and the revised policy is referred to the policy owner for implementation and dissemination.

Minor amendments and updates

26. Minor amendments to policies may be required from time to time. These amendments may be approved by the Chief Executive Officer (CEO) and Academic Dean (Dean) (Academic-related policies) and must be noted at the next meeting of the relevant approval body. Such changes can be categorised as:
 - (a) formatting of policies that are required to align the policy with the approved format as set out in Schedule 1 to this document;
 - (b) updating of position descriptions or delegations arising from changes to governance or workforce roles in line with Zenith's approved frameworks; and
 - (c) any update necessary to reflect government advice or external regulatory or accreditation requirements.
27. Minor editorial updates that do not affect the title or substance of the policy can be approved by the delegate and do not need to be noted by the approving body. These typically will include correction of typographical errors or changes to the title of Australian government departments or stakeholders.

Records

28. The Policy Register will record:
 - (a) the title of the policy and associated documentation;
 - (b) the current version number of each document;
 - (c) the policy owner;
 - (d) the next review date; and
 - (e) relevant stakeholders (for dissemination purposes).
29. The CEO is accountable to the GB for the currency of the *Policy Register*.

Definitions

30. For the purposes of this Policy:

Term	Definition
Policy	A formal statement by the Institute of the approach, position or principles adopted to deal with particular circumstances, governance matters, or areas of operation. As shown in the hierarchy table below (Schedule 2), Government legislation lays the foundation for policies. To the extent that policies and procedures contradict legislation, legislative provisions will prevail. Similarly, to the extent that Level 4 documents is inconsistent with policies and procedures, policy provisions will prevail. The Institute has chosen to include procedural and work instructions into policies for ease of reference by students and staff.
Framework	A formal statement of how the Institute coordinates policies, plans, processes, roles, and other institutional elements to manage an area of operation or achieve an outcome which is central to its operation. Unless otherwise specified in this document, 'policy' includes frameworks.

Version History

Version	Changes	Approval Body	Approval Date
1.0	New Policy	Governing Board (GB)	
1.1	Policy template deleted "Higher Education Standards Framework (HESF) 2021 (Cth)" and replace with "Relevant Legislation."	Governing Board (GB)	22 Feb 2024
1.2	Under Related Documents added "Zenith Governance Framework; Quality Assurance Framework." Point 3 c) added "procedures, forms, registers" Point 5 d) added "...changes in regulatory or legislative requirements, and.." Point 7 d) added "...including new course development" Point 17, deleted "internet" and added "Zenith website"	GB	27 Feb 2025

Schedule 1 – Policy Template

[Title (style = Part L1)]

Approving body	
Date approved	
Date of effect	
Next scheduled review	
Policy owner	
Policy contact	
Related Documents	
Relevant Legislation	

Purpose [style = Part L1]

30. Main clause [style = ME Legal 1]
- (a) sub-clause [style = ME Legal 3]
 - (i) list item [style = ME Legal 4]

Scope [style = Part L1]

31. This Policy applies to:
- (a) to whom; and
 - (b) to what.

Policy [style = Part L1]

Principles [style = Part L2]

32. The Institute will XXX according to the following principles
- (a) Sub-clause
 - (b) Sub-clause

Sub-heading [style = Part L2]

33. In assuring XX the Institute will:
- (a)

Procedure [style = Part L1]

Level 2 Sub-heading [style = Part L2]

Level 3 Sub-heading [style = Part L3]

Level 4 Heading [style = Part L4]

Definitions [style = Part L1]

34. For the purposes of this Policy:
- (a) X means

Term	Definition

Schedule 2 – Document Hierarchy

